

DRAFT STATE PLAN EXECUTIVE SUMMARY

GOVERNOR'S COMMISSION ON ALCOHOL & DRUG ABUSE PREVENTION, INTERVENTION, AND TREATMENT

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Alcohol and drug use is one of the most challenging social and health concerns facing New Hampshire's families and communities. Increased awareness of the effects of alcohol and drug use led the New Hampshire General Court to create the Governor's Commission on Alcohol and Drug Abuse Prevention, Intervention, and Treatment (Commission), effective May 2000. The legislation that created the Governor's Commission also required creation of a State Plan to address the issue of alcohol and drug use in the state. A Draft State Plan was presented to the Commission in July 2001, and addresses two topics: the Scope of the Problem and a Framework for Action. A third topic, Workplan for the Commission, will be completed after the Commission receives input from the citizens of New Hampshire at public forums throughout the state.

SCOPE OF THE PROBLEM:

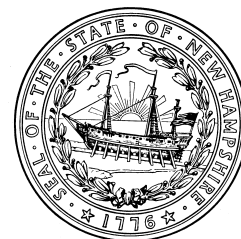
Section one describes the widespread effect alcohol and drug use has on many of the significant problems New Hampshire faces, including:

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| ■ Crime | ■ Non-Payment Of Child Support |
| ■ Juvenile Delinquency | ■ Mental Illness |
| ■ Affordable Health Care | ■ Chronic Welfare Dependency |
| ■ Child Abuse | ■ Teen Pregnancy |
| ■ Family And Domestic Violence | ■ Poor School Performance |
| ■ Highway Safety | ■ Divorce |

It also points out that New Hampshire's policymakers have not given alcohol and drug use issues sufficient attention when developing statewide health and welfare policies. In addition, it includes an overview of the effect alcohol and other drugs have on the lives of citizens of New Hampshire and examines the impact they have on health and health care, social welfare, and public safety.

The cost of substance abuse statewide and nationally is examined, and a discussion of the impact on state budgets, health care, productivity in the workplace, and the economy of the country and our state is included. The Center on Addiction and Substance Abuse at Columbia University (CASA) studied the impact of alcohol and other drug use on state spending, and estimates that states spend \$81.3 billion on substance abuse and addiction, with 96% of that amount spent on the consequences of substance abuse and addiction, rather than prevention or treatment.

After describing the effects of substance abuse on society, Section One raises the question: Is there a solution? An examination of the effectiveness and cost effectiveness of prevention and treatment follows. Reference is made to a study which concludes that treatment for alcohol and other drugs is the most cost effective and socially palliative of all medical treatments. For every dollar spent on treatment, \$11.54 in other medical and social costs are saved. There is also a discussion of some of the barriers to treatment, including stigma, general ignorance about the effectiveness of treatment, lack of accessible or appropriate treatment facilities, and the cost of treatment.



A FRAMEWORK FOR ACTION:

Section Two represents work done by the Commission's Task Forces to examine the following issues:

- **Public Awareness and Education**
- **Intervention and Treatment**
- **Public and Private Funding Sources**
- **Program Monitoring and Evaluation**
- **Prevention**

The Task Forces were charged with describing an ideal framework for their particular issue, current status, and the critical issues the state faces to reach the ideal framework. The critical issues identified by each Task Force are described below.

■ Public Awareness and Education

New Hampshire does not have a baseline understanding of how much the public knows about substance abuse issues, and needs to develop the capacity to do market research in this area. Once we can ascertain how much knowledge the public has, the next step is to develop an educational campaign to reinforce accurate knowledge and address lack of knowledge or misunderstanding about alcohol and other drug use.

We need to create a comprehensive communications plan for the state that would develop an effective media campaign to educate the public and make them aware of the relevant alcohol and drug issues in their communities. In addition, the Commission needs to work with New Hampshire's media partners to find sustainable ways to fund mass media efforts on an ongoing basis.

■ Public and Private Funding Sources

In order to be able to improve all the areas covered by the State Plan—prevention, intervention, and monitoring and evaluation—funding sources must be developed and must be sustainable. Matching funds must be found, community-based providers must be trained in grant writing and fund raising, and an ongoing development plan must be put in place to help guarantee that funding is sufficient to sustain ongoing programs and develop new ones.

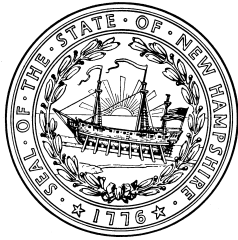
■ Prevention

New Hampshire needs to address several critical areas in order to attain an ideal statewide alcohol and drug prevention system, including:

- ◆ Development of an Outcomes-Oriented Framework
- ◆ Establishing a Training Infrastructure
- ◆ Statewide Coordination of Prevention Expectations
- ◆ Broadening Our Approach to the Prevention of Substance Abuse Beyond Youth-Oriented Issues

Many community-based agencies and coalitions develop and implement prevention programs using the best information and skills available to them. They want to know if their programs are successful but do not have access to statewide tools and benchmarks to measure their efforts. The State has not yet taken the lead in these activities or provided an infrastructure for comprehensive statewide alcohol and drug abuse prevention to assist community-based agencies and coalitions and minimize duplication of effort.

The State needs to adopt an outcomes-oriented approach to establishing priorities and funding programs. This approach would include indicators to provide long-term measures of changes in alcohol and drug use and program outcome measures to determine if a program is successful. This would result in a statewide planning system that would allow policy makers and providers to make responsible prevention programming decisions on both the state and local levels.



There is currently no statewide prevention training program to educate prevention professionals or provide them with an understanding of best practices in the field. A statewide training program could research and share best practices, provide training on basic prevention competencies to increase the number of qualified prevention professionals.

Prevention providers currently rely on a complex funding structure that is complicated by the fact that many of the State agencies providing the funding do not coordinate their priorities or expectations. Improving coordination among State agency funders would allow providers to operate more efficiently and spend less time meeting duplicative requirements.

Most prevention programs in New Hampshire focus on adolescents and pre-teens. We need to expand this focus to include other populations, including seniors, victims of domestic violence, women with children, the homeless, and others.

■ **Intervention and Treatment**

There are three critical issues in the area of alcohol and drug treatment:

- ◆ Closing The Gap Between Treatment Needs And Available Options;
- ◆ Making a Commitment to Quality Treatment; and
- ◆ Building Treatment Partnerships.

In order to close the gap between treatment needs and available options, we need to find a way to manage existing resources more efficiently and effectively and must also develop new sources of treatment funding into the system. Except for limited populations, state law does not require insurance to cover alcohol and other drug treatment, and Medicaid coverage is not available for substance abuse treatment.

Many substance abuse treatment sites are isolated from their communities, are often in unattractive buildings and undesirable neighborhoods. Treatment sites need to be normalized and non-stigmatizing.

There must be an overall commitment to quality treatment, including individualized treatment plans, staff development and training, exposure to and implementation of best practices and encouragement to use new strategies within a structure that supports monitoring and evaluation. Treatment must engage people earlier in the course of their illness and must take into account the chronic and relapsing nature of addiction with a plan that includes assisting people to manage their illness over the course of their lifespan.

Treatment partnerships need to be developed to engage the individual. Such partnerships should exist at in all levels of treatment planning, implementation and evaluation and would include the patient, the patient's family and friends, and the recovery community. There is also a need to develop models of collaboration across state divisions and departments that fund and otherwise support treatment in a way that is seamless for the individuals receiving the treatment.

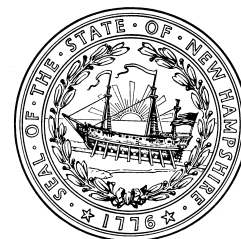
Even more critical is the shortage of treatment providers. Effective treatment cannot take place without a reliable, well-trained workforce. There needs to be a commitment to developing and maintaining a trained, sustainable workforce that will receive competitive salaries and realistic benefits.

■ **Program Monitoring and Evaluation**

This section focuses on three separate areas:

- ◆ Surveillance and Data Collection;
- ◆ Treatment Programs funded by the Division of Alcohol and Drug Abuse Prevention and Recovery (DADAPR); and
- ◆ System-Level Evaluation

In order to obtain meaningful data, existing surveillance and data collection activities must be expanded. This requires additional funding. Also, refining the focus of data collection will produce information that can be used to build effective programs and track their impact on individuals, families, and communities. Targeting efforts to specific populations can focus



existing surveillance and collection funds as well as limit the need for additional funding. In addition, we need to explore the possibility of having all state agencies share data with each other.

DADAPR-funded treatment programs are currently not accredited using national standards. In order to provide consistency among treatment programs, accreditation needs to be implemented.

DADAPR needs to be able to collect program level data, analyze it, and return it to providers in a format that will help the programs design, manage, and monitor improvement initiatives. Benchmarks also need to be developed so that programs can measure how they are doing compared to other programs within the state.

The major program monitoring and evaluation tool that DADAPR currently uses is the federally-funded TOPPS initiative that is limited to obtaining information about treatment programs. When federal funding ends, it is not clear whether DADAPR will have an ongoing source of funding for monitoring and evaluation.

In order to improve DADAPR's system-level evaluation capacity, we must develop a map of the system of all public and private entities that provide substance abuse prevention and treatment programs. This will help us evaluate the process a client goes through to obtain treatment, the resources that are available, how organizations are linked together in the prevention/treatment system, learn if there are service overlaps or gaps, and if there are any feedback loops for communication or data that can be used for improvement and follow up.

We must also develop common definitions of key data elements on a statewide basis. Common outcome and performance measures should be used along with standards for maximizing access to client information while protecting individual privacy. We also need to find solutions to technical issues related to database architecture, software capability, etc., and ensure that system-level data development is compatible and complementary to program monitoring activities. In addition, DADAPR needs additional resources (both funding and staff) to improve its capability for data collection and management and other entities in the state, e.g., the courts, also need additional resources.

WORKPLAN FOR ACTION:

There are many issues that need to be addressed before an ideal substance abuse prevention and treatment system can exist in New Hampshire. Although progress has been made in recent years, there is still much to be done.

An important first step is to make sure that we have identified the most important alcohol and other drug use issues that exist in our communities. The Commission plans to learn what the critical issues are throughout the state by holding public forums to solicit input from the citizens. Once input is received, the Commission will develop its workplan for action which it will use to refine and expand the existing substance abuse prevention and treatment system in order to create a more ideal system that will provide the best possible services and programs to all New Hampshire residents.